



NASW

National Association of Social Workers / Connecticut Chapter

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**Testimony on HB 6824
Governor's Proposed Budget on School Based Health Clinics
Appropriations Committee
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Submitted by: Stephen A. Karp, LMSW

The NASW/CT chapter, representing over 2,800 members urges the Appropriations Committee to reject the proposed reduction in the Department of Public Health budget of nearly \$2 million in funding in the biennial budget of FY 16-17 for School Based Health Clinics (SBHC). These cuts will mean reduced clinical hours, reduced service hours and potentially staff layoffs. There are currently 92 state funded SBHCs serving 22 communities.

According to the National Mental Health Association, less than 1 in 5 of the 12.5 million children in need of mental health services actually receive them. Many of these children will not achieve academic success due to social, emotional and behavioral problems affecting school performance. SBHC's have been proven to help these students through means of prevention, early identification, intervention, counseling and support. Especially in both urban and rural communities where many families do not have access to affordable mental health care it is the SBHC's clinical social worker or other mental health provider that meets the child's mental health needs. **In the last 4 years, visits to SBHCs for behavioral health services has increased by 11%, from 30% to 41% and all indicators are that this upward trend will continue.** The public expects children's mental health to remain a priority in the FY 16-17 state budget, and that includes SBHCs.

SBHCs heavily rely on state funding for continued operations. Yes SBHCs bill both HUSKY and private insurance whenever possible but that funding stream is insufficient as not all services are covered, high deductibles and copays are often unaffordable for the student's family, the number of covered sessions are often too limited, reimbursement rates are low, and coverage may be denied. State funding at the pre-rescission amount of FY \$12,048,716 is the minimum needed for the coming two years, and even at that funding level current services may be threatened and expansion of SBHCs will be impossible.

For many students the SBHC is the only health and mental health service available to them. A comprehensive SBHC offers mental health treatment, address acute conditions, provide preventive medical exams, treat injuries, offer oral health care, provide follow-up on chronic conditions and offer health education. These are services that benefit the student, the student's family, and the school system by having a healthier student body. However services once dismantled are not easily gained back and the loss of services to school children will make it harder for those children to successfully meet their educational goals.

Schools do not function in a vacuum. When students cross that school door they bring with them the life stresses of their family, impacts of poverty, trauma of witnessing violence, fears of being bullied, chronic and acute health problems, and in this still weak economy where so many families are struggling to get by all of the concerns that a weak economy places on a family press on the student's mind. All of these factors are obstacles to learning. All of these obstacles are brought into the classroom. The behavioral staff of SBHC's breaks through these barriers by providing students with a safe place to seek care within the school. This in turn allows students to return to the classroom ready to be productive in their educational learning. Despite the budget deficit we must not reduce SBHC services that are cost effective and proven to work in helping students to be successful within school.